

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: METHODS TO REGULATE BIOFILM  
FORMATION

Attorney Docket Number:: 028722-381

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 10

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Douglas  
Middle Name:: G.  
Family Name:: Storey  
Name Suffix::  
City of Residence:: Calgary  
State or Province of Residence:: Alberta  
Country of Residence:: Canada  
Street of Mailing Address:: 9 Silverstone Mews, N.W.  
City of Mailing Address:: Calgary  
State or Province of Mailing Address:: Alberta  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: T3B 5K8

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: D.  
Family Name:: Parkins  
Name Suffix::  
City of Residence:: Calgary  
State or Province of Residence:: Alberta  
Country of Residence:: Canada  
Street of Mailing Address:: 2 Cathedral Road, N.W.

City of Mailing Address:: Calgary  
State or Province of Mailing Address:: Alberta  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing  
Address:: T2M 4K3

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Howard  
Middle Name::  
Family Name:: Ceri  
Name Suffix::

City of Residence:: Calgary  
State or Province of Residence:: Alberta  
Country of Residence:: Canada  
Street of Mailing Address:: 3824 Brooklyn Crescent, N.W.  
City of Mailing Address:: Calgary  
State or Province of Mailing Address:: Alberta  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing  
Address:: T2N 1N4

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Merle  
Middle Name:: E.  
Family Name:: Olson

Name Suffix::

City of Residence:: Calgary

State or Province of Residence:: Alberta

Country of Residence:: Canada

Street of Mailing Address:: 5420 Dalymple Crescent, N.W.

City of Mailing Address:: Calgary

State or Province of Mailing Address:: Alberta

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing

Address:: T3A 1X7

### Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: (650) 622-2300

Fax Number: (650) 622-2499

### Representative Information

Representative Customer Number:: 21839

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
Claims priority to	Provisional Application No.	60/465,153	4/23/03

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee Name:: University Technologies International, Inc.  
Street of Mailing Address:: 3553 31st Street, N.W.  
City of Mailing Address:: Calgary  
State or Province of Mailing Address:: Alberta  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing  
Address:: T2N 2A1